

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
VA Central Ohio Healthcare System

PGY1 Pharmacy Residency



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Site #44150
Match #123513**

Overview of the Residency Program

The Chalmers P. Wylie VA Ambulatory Care Center is part of the VA Central Ohio Healthcare System (VACOHCs) and provides primary and specialty outpatient care to veterans in Central Ohio. Clinical Pharmacist Practitioners (CPP) are highly respected and an integral part of patient care activities. Additionally, the clinic operates four community-based outpatient clinics in Grove City, Marion, Newark, and Zanesville. The Ambulatory Care Center is located 10 minutes from The Ohio State University and serves as a training site for Pharm.D. candidates from various accredited colleges of pharmacy.

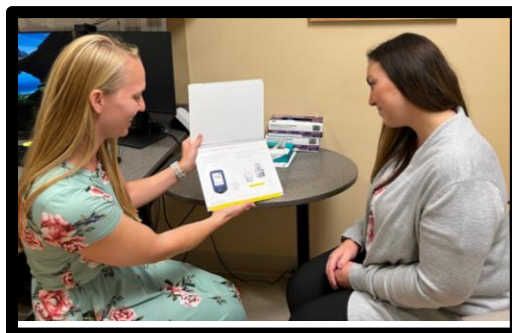
The VACOHCs offers an ASHP-accredited PGY1 pharmacy residency program. Residents receive training in various clinics for direct patient care and disease state management including Anticoagulation, Pharmacy Comprehensive Medication Management (CMM) which is also known as our Patient Aligned Care Team (PACT) clinics, and Home Based Primary Care. Specialty elective rotations including Pharmacogenomics and Mental Health allow residents a unique opportunity to work in a focused pharmacist-run clinic interpreting pharmacogenomic test results and making clinical recommendations and managing mental health medications to patients enrolled in the mental health pharmacy clinic. Residents will also spend time in the counseling and dispensing area of the outpatient pharmacy. In addition to providing pharmaceutical care, residents will participate in answering drug information questions, providing staff education, and completing research, quality improvements and/or a system redesign project. Residents are involved in P&T meetings, medication use evaluations, and pharmacy informatics through the drug policy rotation and additionally complete an administration rotation with the Chief of Pharmacy. Residents will gain teaching experience by serving as co-preceptors for Pharm.D. students from various accredited colleges of pharmacy.

Purpose Statement

PGY1 Program Purpose: PGY1 pharmacy residency programs build on the Doctor of Pharmacy (Pharm.D.) education and outcomes to contribute to the development of clinical pharmacy practitioners responsible for medication-related care of patients with a wide range of conditions, eligible for board certification, and eligible for postgraduate year two (PGY2) pharmacy residency training.

Pharmacists completing a PGY1 pharmacy residency at the VACOHCs will be competent, effective, and confident practitioners who provide expert pharmaceutical care to adult veteran patients.

These pharmacists will be trained in a collaborative healthcare setting to apply evidence-based disease state management and provide support to their Patient Aligned Care Teams (PACT). By applying the knowledge and skills learned during this year, residents completing the program will be eligible for employment into entry level clinical pharmacy positions and have the capabilities of developing new ambulatory care services within the VA and other adult ambulatory care clinic settings. These pharmacists will demonstrate skill in providing education to pharmacy students, patients, and other healthcare providers.



Pharmacist providing education in clinic.

Program Structure: Core Activity Areas

Orientation and Development The resident will work with the RPD and/or designee(s) in the month of July to review orientation materials for the residency program. Activities include orientation to the staff and work site, residency year schedule, electronic health record, VA Pharmacy Benefits Management (PBM), Lean Six-Sigma/IRB and R&D if appropriate, PharmAcademic, Initial Skills Assessments/Reviews, Learning Experience Descriptions for core rotations, and VA policy and procedures. The resident will complete entering interest forms and provide self-assessments of their learning needs. The Resident Development Plan will be finalized by the end of July. The Resident Development Plan will be adjusted quarterly to fit the resident's learning needs and to choose electives. The Residency Advisory Committee will review quarterly summative evaluations for overall resident progress and improvement to the program.

Pharmacy Comprehensive Medication Management (CMM) Block & Longitudinal Rotations: The resident will work daily for 4-6 weeks in the CMM clinic for a block rotation providing patient care in clinic or through virtual care appointments. The rotation will focus on the chronic disease state management of common chronic disease states including hypertension, hyperlipidemia, diabetes, tobacco cessation, hypothyroidism, COPD, and vitamin D deficiency. CMM occurs in Patient Aligned Care Teams (PACT) where clinical pharmacist providers (CPP) have a global scope of practice, meaning that they are constantly learning and growing to find ways to help their primary care teams manage new disease states and meet Veteran care needs. CPPs function as licensed independent practitioners with their scopes of practice with prescriptive authority giving them the ability to initiate, adjust, discontinue and monitor medications as appropriate. The resident may have exposure to other services offered by the Pharmacy CMM Clinic including medication reconciliation, polypharmacy review, and epoetin monitoring. After the block rotation, the longitudinal rotation begins and continues for 1-2 days per week through the remainder of the year. During the second half of the year, the goal is for the resident to function more independently taking on more patients and precept APPE student(s).



Resident, Veteran & Pharmacist

Anticoagulation Clinic Block and Longitudinal Rotations - The resident will work daily for 4-6 weeks in the Anticoagulation Clinic for the initial block rotation. VA providers refer all anticoagulated patients to the Anticoagulation Clinic where CPPs perform anticoagulation initiation and monitoring. Point of care machines

are used for warfarin therapy and pharmacists make dose changes with patients during appointments. The rotation will focus on the management of warfarin, direct oral anticoagulants (DOACs) and proper use of outpatient enoxaparin. The block rotation will focus on warfarin clinic and consult management. The longitudinal rotation will begin during quarter two for 1-2 days/week and continue to develop the resident's clinical knowledge with anticoagulant dosing and monitoring, perioperative management, and DOAC dashboard management.



Anticoagulation Clinic

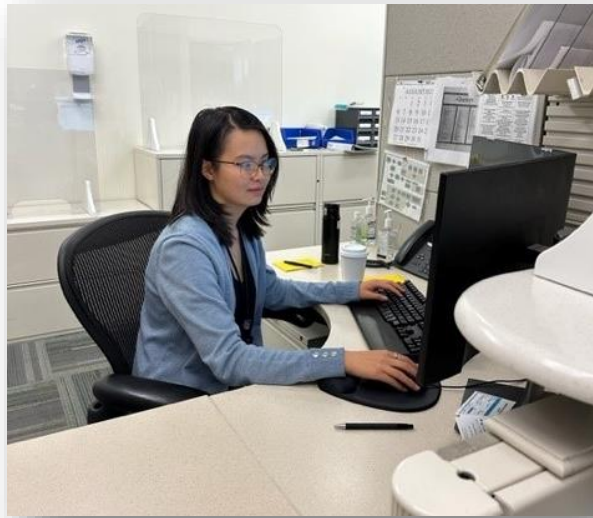
Home Based Primary Care (HBPC) HBPC serves patients with complex chronic disabling medical conditions. The resident will spend 2 days per week for 2 months working with the HBPC pharmacist performing chart reviews, participating in weekly interdisciplinary team meetings (if schedule permits), completing CMM, and going on home visits as allowed and appropriate. The resident will make recommendations to optimize patient's medication regimen based on disease state specific therapeutic goals and minimize polypharmacy. The resident will participate in bi-weekly case discussions and article reviews during this rotation. Additionally, the resident will serve as a resource to the HBPC team for drug information and patient/provider education.



Pharmacist checking blood pressure

Patient Counseling and Dispensing The resident will spend 4 weeks in the first quarter training in the areas of prescription processing and dispensing medications. During this time, the resident will increase their efficiency in prescription processing and providing counseling to patients. The goal is for the resident to be independent early on and thus able to function independently as a clinical pharmacist in this setting. The rotation preceptors will provide feedback and regularly assess progress towards the rotation goals so that additional time and training can be provided if needed. The resident will be required to work one weekend day per month as a staffing component for this residency throughout the residency year. The goal is to have dual appointment set up which would allow the resident to be paid for this time at a GS-12 pharmacist hourly salary but is not guaranteed.

Pharmacogenomics – The resident will spend 0.5 days/week for 8-10 weeks on this required rotation. The VACOHCS is participating in the Pharmacogenomics Testing for Veterans (PHASER) Program. This test can help to individualize prescriptions for medicines used to treat several common health concerns, including pain, depression, anxiety and blood clotting. Pharmacists are key members of this team and complete e-consults to interpret and help providers understand results once completed. Pharmacists also can be consulted to review results with patients.



Pharmacy Counseling Booth

Drug Policy – The resident will spend time working with the Associate Chief of Clinical Services longitudinal throughout the residency year. This rotation will take no more than $\frac{1}{2}$ day per week and may have time separately assigned or may be combined with assigned project time. Pharmacists at the VA Ambulatory Care Center participate in activities to improve the quality of pharmaceutical care including adverse drug event reporting, medication error prevention, medication error reporting, and medication use evaluations. The Pharmacy and Therapeutics Committee is responsible for local management of the VA national formulary, medication performance measures, and medication use evaluations. The VA uses computerized patient records and has a host of contemporary computer software including programs designed to perform statistical analyses and data mining for medication evaluations.

Administration - The residency program is designed to provide one on one experience with the Chief of Pharmacy monthly throughout the residency year to learn about management-related activities vital to the smooth operation of a pharmacy department. The resident will spend one day per month with the chief and may have additional discussion sessions assigned.

Education - The education learning experience is a required, longitudinal rotation. This rotation provides the PGY1 resident with opportunities to develop skills for the provision of effective medication-related training. Examples of projects include drug information questions, journal clubs, continuing education (CE) presentations, and education/precepting of pharmacy students. The experience will be longitudinal and incorporated into the weekly schedule during project time along with the resident preparing projects after hours as appropriate to facilitate completion.



Medical Scheduling Assistants

Pharmacy Project - The research project will give the resident experience to design, execute, and report results of investigations of pharmacy-related issues. Pharmacy projects may go through a formalized IRB and Research and Development Committee approval process. An alternative to this is to have the resident participate in a LEAN yellow belt training course and work on systems redesign yellow belt project as a way to identify issues, and work towards creating, implementing, and sustaining a solution during the residency year. This is a yearlong, required, longitudinal rotation. Residency projects may be worked on during assigned project time but do not always have time assigned and may require residents to work outside of business hours to ensure progress and completion.

Longitudinal Leadership – The required yearlong longitudinal leadership rotation is in collaboration with other VISN 10 VA PGY1 pharmacy residency programs. There are TED talks or articles assigned based on monthly topics which the residents are required to review. After review and self-reflection, the residents post discussion as well as comment on other residents' posts. Monthly discussions build on the self-reflections and posts through discussion with PGY2 residents as available. While there is no formal time assigned for this rotation, residents find it beneficial to discuss some important topics such as giving and receiving feedback, work life balance, time management, and storytelling/speaking skills amongst others.

Burnout Management/Duty Hours – Residents are required to complete a monthly assessment where they reflect on important topics like emotional, mental, and physical health as well as sleep. They are also required to confirm they are in compliance with the ASHP Moonlighting hours policy and report any Moonlighting hours within this document. This assessment is discussed with the RPD monthly to identify any issues which have come up although the resident is always encouraged to discuss any concerns with the RPD as soon as possible. There is no time assigned for the completion of this monthly self-assessment and residents are required to find time to complete the same. The resident and RPD will find time monthly to discuss the resident's response on the survey and identify if there are any areas of concern.

Elective Rotations: Residents will have the opportunity to select a minimum of one elective rotation. Availability of rotations is always dependent on multiple factors including preceptor availability and resident interest/space.

Teaching Certificate - An optional Teaching Certificate elective is available through The Ohio State University College of Pharmacy. The residents schedule will be arranged to attend teaching activities and workshops. The

course assigned by OSU may vary but historically requires the residents teach every other Monday from January through April. The residents are required to attend round table discussions with College of Pharmacy faculty to enhance learning.

CBOC - The VA operates Community Based Outpatient Clinics (CBOC) as satellites of the main facility. CBOC's operate in mostly rural areas and offer primary care and some specialty services. Clinical pharmacist providers are integrated into the PACT model offering comprehensive medication management and drug information services. As the sole CPP in this environment, the resident learns to operate more independently in terms of time and workflow management. The structure of this rotation may vary based on resident schedule and preceptor availability. Previously used structures included 1-2 days/week for 1-2 months or a block format of 2-4 weeks.

Nephrology/Endocrinology - Opportunities may exist for the pharmacy resident to work in specialist clinics with the endocrinologist(s) and nephrologist(s) learning about specialized management of issues pertaining to diabetes (insulin pumps, U500 insulin, type 1 diabetes, and use of continuous glucose monitors), hyper/hypothyroidism, hormone imbalance, resistant hypertension, and chronic kidney disease. The structure of this rotation may vary based on resident and preceptor availability but previously residents have spent 0.5-1 day/week for 8 weeks on this rotation.

Oncology - Residents may have the opportunity to work with the oncology CPP who works with the VA oncologist to develop oncology treatment plans and run a pharmacist managed oral chemotherapy clinic. The structure of this rotation may vary based on resident and preceptor availability but previously residents have completed a block structure of 4-6 weeks on this rotation.

Mental Health/Behavioral Health – Residents may have the opportunity to work with the mental health CPP to learn about cognitive, behavioral, and medical related interventions for complex mental health conditions. Residents would gain experience caring for Veterans in the outpatient setting with PTSD, depression, anxiety, bipolar disorder, and schizophrenia. The structure of this rotation may vary based on resident and preceptor availability but previously residents have spent 1 day/week for 8 weeks on this rotation.

Hospital at Home (HAH) – This program provides a higher level of medical care to specific hospital diagnoses amenable to treatment in the comfort of a person's own home setting. The pharmacist completes patient chart reviews on admission and every 90-110 days. Responsibilities include assessment for duplication of therapy, drug interactions, adverse reactions, therapeutic dosing, and appropriateness of drug therapy. The pharmacist serves as an interdisciplinary team member and is available for questions pertaining to patient care by HAH team members. The resident would spend 0.5 day/week for 8-10 weeks on this rotation.

Geriatrics Clinic - The Geriatric Patient Aligned Care Team (PACT) includes a team of health care professionals who are experts in the care of geriatric Veterans. The pharmacist on this primary care team participates in interdisciplinary meetings and assists the team by completing comprehensive medication reviews with recommendations that are adapted to the aging Veteran. The CPP also works with a scope of practice to manage chronic disease states with a unique lens to the aging Veteran and complete VIONE reviews. The resident would spend 1 day/week for 8-10 weeks on this elective rotation.

Women's Health Clinic – The CPP provides the same care as other PACT pharmacists and additionally women-specific care for reproductive health and menopause. Additional responsibilities include completing medication reviews to ensure safety during pregnancy and postpartum care. The resident would spend 1 day/week for 8-10 weeks participating in this clinic.

Other electives are possible and determined based on resident interest and preceptor availability as the year progresses.



Pharmacy Preceptors

Residency Video:

www.youtube.com/watch?v=9FC9kMeaatU

Contact Information

Mallory Accursi, PharmD, BCACP
PGY1 Pharmacy Residency Program Director
PACT Clinical Pharmacy Specialist
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Email: Mallory.Accursi@va.gov

Requirements for Acceptance

1. Have a Doctor of Pharmacy degree from a fully accredited ACPE school of pharmacy within the United States or equivalent experience.
2. Have a license in good standing to practice Pharmacy from a recognized State Board of Pharmacy or in pursuit of and eligible for licensure.
3. Be a United States citizen.
4. Participation in the ASHP Match Process.
5. Submit application through PhORCAS (see below).

Supplemental Requirements for PhORCAS

1. Submission via PhORCAS by **January 2nd**.
2. Letter of intent, including career goals and objectives for seeking a residency.
3. Official College of Pharmacy transcripts.
4. GPA ≥ 3.2 from pharmacy school as demonstrated on official school transcript.
 - For schools which use Pass/No Pass grading, require letter of standing from school indicating student is in top 25% of graduating class.
5. ASHP standardized recommendation form from 3 references.
 - A minimum of 2 references must be from preceptors from your work or experiential practice sites.

Ensure to include in application package all information that demonstrates involvement in projects, presentations that you find valuable for our reviewing committee.

Duration of Appointment, Benefits, and Leave:

One Calendar Year: July 1, 201X to June 30, 201X

Stipend: \$49,228 with health insurance available

Annual Leave: Four hours of annual leave per pay period

Sick Leave: Four hours of sick leave per pay period

Administrative Leave: Available for meetings and symposia. This is approved on a case-by-case basis and any days would count towards the 37 days away from residency.

Federal Holidays: Eleven federal holidays

Liability Insurance: You will not need any additional practice liability insurance during your residency.

Travel to Conferences: Payment for travel to conferences is not guaranteed. The RPD will work to gain approval for funding to travel to the ASHP Midyear Clinical Meeting or other required conference. If the facility does not approve funding, the resident may need to pay for travel and registration. The use of dual appointment position is intended to assist residents in picking up hours to help pay towards their travel to this meeting.

Diversity and Inclusion Commitment

The Department of Veterans Affairs (VA) upholds a strong commitment to diversity and inclusion, with core values “I CARE” (Integrity, Commitment, Advocacy, Respect and Excellence) reflecting that commitment. The VA “Diversity and Inclusion Strategic Plan” for 2021-2022 outlines goals such as supporting a diverse workforce, creating an inclusive and engaged organization and delivering outstanding public service.¹ Aligning with these goals and mission of the VA, the VA Central Ohio Healthcare System’s PGY1 Pharmacy Practice Residency Program is dedicated to ensuring these values are upheld within the program, with the goal of building a team and fostering an environment that reflects the diversity of the Nation’s Veterans that we serve.

The program aims to immerse pharmacy residents in caring for a diverse veteran population to help cultivate the resident’s own experience. The Office of Health Equity estimates that from 2019 to 2045, the racial and ethnic composition of veterans will change, with the majority of numbers of other races and ethnic minority groups increasing.² Veterans may also face other disparities such as differences in socioeconomic status, education, social context and support, life experience, and perceived discrimination. Additionally, the Office of Research and Development suggests that veterans within these groups tend to have higher rates of chronic illness.^{3,4}

By embracing diversity and welcoming those of all backgrounds and perspectives, irrespective of race, gender identity, gender expression, ethnicity, age, religion, orientation, culture or life experience, the program hopes to celebrate each person’s uniqueness and drive the profession of pharmacy forward. The program is committed to promoting inclusion and ensuring individuals are valued and empowered to reach his/her/their full potential.

In addition to celebrating diversity and embracing inclusion, the residency program aims to select candidates who are professional, compassionate, highly motivated and whose ideals align with the VA mission of “I CARE.” Our program will support and encourage clinical growth, so the resident develops into an independent pharmacy practitioner who is committed to providing optimal care to a diverse patient population.

References:

[1. VA Diversity and Inclusion Strategic Plan FY21-22](#)

[2. Population Page - Racial and Ethnic Minority Veterans - Office of Health Equity \(va.gov\)](#)

[3. Health Equity \(va.gov\)](#)

[4. Diversity, equity, inclusion – VA goals - VA News](#)

VA Central Ohio Healthcare System
PGY1 Pharmacy Residency
Example of Yearly Overview

Rotations	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Orientation												
Counseling & Dispensing			1 Weekend Day per Month									
Anticoag.					Longitudinal CMM and Anticoagulation							
CMM					Longitudinal CMM and Anticoagulation							
HBPC									2 days/week			
Education	ISA	Drug Information Questions, Journal Clubs, & MOVE Class					CE Presentation & Precept APPE Students		Precept APPE Students			
Electives							Elective 1 Ex: Mental Health			Elective 2 Ex: CBOC		
Drug Policy	ADR Reporting MUE P&T Committee Formulary Conversions											
Admin.	1 day with Chief every month											
Service Com	Obtain PharmD License	Attend OSHP Resident Show case*			Attend ASHP Midyear*		Participate in Resident Interviews		Present project at selected meeting			

*Pending funding and travel approval

VA Central Ohio Healthcare System
PGY1 Pharmacy Residency - Example of Residency Schedule for Clinics

Quarter 1

		July	August	September	October
Resident		Orientation	Counseling & Dispensing	Anticoagulation	CMM

Monthly administration meeting with Chief of Pharmacy

Drug Policy – begin working on Newsletter, attend P&T meetings, begin adverse drug event reporting

Quarter 2

November- December (Begin longitudinal Anticoagulation, PACT)

		Monday	Tuesday	Wednesday	Thursday	Friday
Resident 1	A M	CMM	AC	Drug Policy	AC	AC
	P M	CMM	PACT	Project	Elective	AC
Resident 2	A M	CMM	AC	Drug Policy	CMM	Project
	P M	CMM	AC	AC	CMM	Project

Quarter 3

Resident 1	A M	Elective	CMM – student	HBPC	HBPC	Project
	P M	Elective	CMM – Student	HBPC	HBPC	AC - Student
Resident 2	A M	Teaching/AC	Project	CMM	HBPC	HBPC
	P M	Teaching/AC	AC - Student	CMM	HBPC	HBPC

Quarter 4

Resident 1	A M	CMM	CMM	AC	Project	Drug Policy
	P M	CMM	CMM	AC Consults/ DOACs	Elective	Admin
Resident 2	A M	AC	Elective	CMM	CMM	AC
	P M	AC	Elective	CMM	CMM	Project

CMM = Comprehensive Medication Management ACC = Anticoagulation Clinic DOAC = Direct Oral Anticoagulant

Activities not listed on the schedule: The residents will attend P&T meeting (3rd Wed of month).
Education projects (CE, DI, JC). Pharmacy Project.